Political Organization Notice of Section 527 Status

OMB No. 1545-1693

Name of organization Town Domocratic	r y i		Employer identification number
			142 02 12 865
2 Mailing address (P.O. Box or numb	er, street, and room or	suite number)	
Des Moires IA	5032		
3 E-mail address of organization			
4a Name of custodian of records	41	Custodian's address	
Mary Maloney		5 661 Flour Pr Des Moires IA	50371
Sa Name of contact person	51	Contact person's address Sob Fow Pr	
Mary Malorey		Des Moine IA	20351
8 Business address of organization (if	different from mailing	address shown above). Number, street, a	nd room or suite number
City or town, state, and ZIP code			
Part II Purpose		· · · · · · · · · · · · · · · · · · ·	
7 Describe the purpose of the organiz	ation		
State Committee	of the 1)e	mocratic Herty.	
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art III List of All Related En	itities (see instruc	tions)	
	Atities (see instruc	tions) Bc Address	
Ba Name of related entity			
Ba Name of related entity			
Ba Name of related entity			
Ba Name of related entity			
Name of related entity None SECENED			
Name of related entity NONE SECEIVED			
Name of related entity NONE SECEIVED	8b Relationship		
Name of related entity NONE AUG 0 1 2000	8b Relationship		
Name of related entity None RECEIVED	8b Relationship		
None of related entity None REFINED	8b Relationship		
None of related entity None REFINED	8b Relationship		
Name of related entity None SECENED	8b Relationship		
None of related entity None Reference	8b Relationship		

Part IV List of All Officers, 9a Name	96 Title	mpensated Employees (see instructions) 9c Address
Rob Tully	Chair	300 Walnut Suite S
		Dos Moines IA S0309
DebTurner	15 Vice Chair	190 Lakerier Dr
		Mason City IA SOYOJ
Greg Steensland	209 Vice Chair	19351 Monument Rd
		Council Bluffs IA S1503
Mary Maloney	Treasurer	3415 Witner Parkway
		Des Morus IA 503/0
Cecilia Fineran	Secretary	210 N. 11th St.
		Denison IA 51442
Jeani Murray	Executive Dir.	5661 Flew Dr.
		Des Mares IA 50321
Under penalties of perjury, I of Revenue Code, and that I have it is true, correct, and complet.	sexamined this notice. Audinglish acco	Part I is to be treated as an organization described in section 527 of the Internal impanying schedules and statements, and to the best of my knowledge and belief.
in is was, correct, and complete	m()	_//
Sign Signature of authorized	official official	7/.27/00 Date

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Form 8871 (7-2000)